

## PAST PERFORMANCE QUESTIONNAIRE

### PART I: Background Information

<b>OFFEROR:</b>	
<b>DATE OF EVALUATION:</b>	
<b>REFERENCE COMPANY NAME:</b>	
<b>REFERENCE POINT OF CONTACT:</b>	
<b>REFERENCE TITLE:</b>	
<b>REFERENCE TELEPHONE NUMBER:</b>	
<b>REFERENCE FAX NUMBER:</b>	

### PART II: Description of Services Provided

<b>Contract Number of Project</b>	
<b>Contract Performance Period</b>	
<b>Actual Performance Period</b>	
<b>Type of Services performed</b>	
<b>Total dollar value of contract</b>	

<b>KEY:</b> 0= CANNOT RATE 1= UNACCEPTABLE/EXTREMELY LOW 2= MARGINAL/LOW	3= ACCEPTABLE/MEDIUM 4 = VERY GOOD/HIGH 5 = EXCELLENT/EXTREMELY HIGH
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### PART I: Effectiveness of Service and Personnel

1. How satisfied are you with the overall performance of the offeror?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
2. To what degree did the Contractor understand the work?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
3. How effective was the contractor's ability to retrieve information necessary for identifying overpayments?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
4. How effective was the contractor's ability to retrieve information necessary to substantiate overpayments?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
5. How effective was the contractor in establishing and maintaining a positive working relationship?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
6. To what extent did the contractor respond to and correct any concerns, issues, or problems that appeared during the performance of the requirement?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
7. How would you rate the effectiveness of the contractor's problem resolution efforts?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
8. To what degree did the contractor provide the right types and numbers of personnel in order to complete the task in the time required?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
9. How would you describe the degree of accuracy the contractor's team achieved (for hard and soft data collection, percentile of accuracy)?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
10. Did the contractor use sub-contractors for part or all of the requirements of the contract?	<input type="checkbox"/> YES <input type="checkbox"/> NO
11. If yes, how would you rate the working relationship between the sub-contractor and your agency personnel?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0

**PART II: Timeliness of Performance**

1. Did the contractor complete the requirement in the time specified in the contract?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. To what extent did the contractor adhere to the performance schedule?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
3. Did the contractor require any extension in performance schedule?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. If yes, to what extent did the performance extension impact your agency?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
5. How would you rate the contractor's timeliness in providing periodic status reports on the project?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
6. Rate the contractor's timeliness in providing a Final Detailed Report and Briefing?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0

**PART III: Similarity of Work Performed**

Type of services the Contractor provided:	
<b>Accounts Payable Research - Recovery Audit Services (identification of overpayments that resulted from duplicate payments, input keying errors, pricing errors, interest, vendor credit memorandums, calculation errors, manual extensions, discrepancies in case pack quantities and discounts offered but not taken).</b>	
a. To what degree did the contractor provide services that were similar to Accounts Payable Research as identified above?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
<b>Price Offer Review (price inequities) - Recovery Audit Services (identification of overpayments that resulted from price offers not meeting the price warranty that prices will be as low or lower than those offered to other companies under similar terms and conditions).</b>	
a. To what degree did the contractor identify overpayments that were attributable to pricing inequities?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
b. To what degree, when identifying overpayments resulting from pricing inequities, did the contractor routinely explain the rationale applied when arriving at its conclusions?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
c. To what degree were such conclusions supported with substantial documentation?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
d. To what degree did the contractor demonstrate a reasonable understanding of the wholesale/retail pricing mechanism as well as the cost components which, when combined, served to create such pricing?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
2. Did the Contractor exhibit knowledge and expertise in this field?	<input type="checkbox"/> YES <input type="checkbox"/> NO

**PART IV: Closing Comments**

1. If given a choice, explain why you would or would not consider the contractor for this contract again.	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. How would you rate the contractor's overall compliance with the terms and conditions of your agreement/contract?	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
3. Provide any additional comments you feel would be pertinent regarding past performance of this company:	

EVALUATOR NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_